SENDER COMPLETE THIS SECTION	DOCUCCMPLETE THIS SECTION ON DELIVERY Page 1 of
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>Warden J.C. Giles</li> <li>Ventress Correctional Facilit PO Box 767</li> <li>Clayton, AL 36016</li> </ul>	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No
COO 05-707	3. Service Type  Certified Mail
Article Number     (Transfer from service label)     7005	1160 0001 3017 3386
PS Form 3811, February 2004 Domest	ic Return Receipt 102595-02-M-1540

Domestic Return Receipt

102595-02-M-1540